

PSD PEARL HARBOR TRAVEL CLAIM TRANSMITTAL SHEET

COMMAND:

DATE:

PLR NAME:

PLR EMAIL/PHONE:

#TAD CLAIMS:

				DATE TRAVELER	DATE CLAIM SIGNED	DATE FORWARDED
NAME	SSN	SDN #	EMAIL ADDRESS	RETURNED FROM TAD	BY TRAVELER	TO PSD

PRIVACY ACT STATEMENT

AUTHORITY: 5 U. S. C. Section 5701, 37 U. S. C. Sections 404-427, 5 U. S. C. Section 301, DoDFMR 7000.14R, Vol. 9, and E. O. 9397

PRINCIPAL PURPOSE(S): This record is used for reviewing, approving, accounting, and disbursing money for claims submitted by Department of Defense (DoD) travelers for official Government travel. The Social Security Number (SSN) is used to maintain a numerical identification filing system for filing and retrieving individual claims.

RECEIVED BY: _____

DATE AND TIME RECEIVED: _____